

Department of Health Care Services (DHCS)
Medi-Cal Dental Program

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Proposed Provider Participation Measurement Revisions

I. Background

On April 2, 2015, the Department of Health Care Services (DHCS) consulted with the stakeholder community regarding DHCS' proposal to establish criteria for assessing provider participation in the Medi-Cal Dental fee-for-service delivery system as recommended by the California State Auditor's (CSA) Office. In response to the first set of stakeholder feedback received, DHCS revised the provider participation measurements, and DHCS will consider phasing in additional data to support the objective assessment of provider network adequacy.

II. Revised Provider Participation Measurement

A. County-Specific Licensed Dentist-to-General Population Ratio Standard as Benchmark

Counties with provider participation ratios that do not meet the dentist-to-general population ratio standard will be identified as counties that may not have sufficient active dental providers. Based on Census data and 2014 dental provider information from the California Dental Board, the statewide ratio is 1:1,741. County-level ratios vary significantly due to the number of licensed dentists in specific counties. This information will be used to develop targeted mitigation strategies and geostrategic outreach to licensed providers that may not be enrolled or participating in the Medi-Cal Dental Program.

B. Measurement Methodology

Numerator: Number of rendering providers and number of safety net clinics who serviced 25, 50, 75, and 100 or more unduplicated beneficiaries in a 12-month period

Denominator: Total Medi-Cal eligibles (for whom dental is a covered benefit) in the county

C. Age Stratification

Consistent with the feedback received, DHCS will also examine information about number of children and adults being seen by Medi-Cal dental providers compared to the number of children and adults in the general population to the number of licensed dentists. .

III. Additional Information to Consider Regarding Provider Participation Measurements

Referral list data and provider network capacity information will be phased in as secondary and tertiary layers for assessing provider participation in the Medi-Cal Dental fee-for-service network.

A. Referral List Information – Secondary

DHCS collects referral list information, which is voluntarily provided by the dental provider office. The following data elements are readily available to track and inform provider participation:

- County
- Dental provider specialist information
- Languages offered

Although DHCS captures the following information for each service office location to the extent the service office provides the information, the data is not captured in a format that can be queried and aggregated and would require manual effort to extract:

- General anesthesia/sedation availability
- Type of special needs accommodated
- Age groupings seen, if limited
- Any limitation on availability to Medi-Cal patients

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DRAFT

DHCS anticipates including the first set of referral list data in its release of the first provider measurement reporting, but would require additional time to provide the second set of information.

B. Provider Network Capacity Information – Tertiary

DHCS will conduct bi-annual surveys to determine the capacity of providers and safety net clinics to see Medi-Cal beneficiaries. Provider surveys will request the following information:

- Proportion of the provider's practice that serves Medi-Cal beneficiaries, stratified by children and adults
- Number of new Medi-Cal beneficiaries that can be accommodated each week, stratified by children and adults
- Provider office hours and days of operation
- Provider office wait time averages for appointments consistent with the generally accepted timely access to care standards (e.g. urgent appointments must be scheduled within 72 hours).
- Whether any limitations apply for Medi-Cal patients in obtaining an appointment
- Feedback on what the program can do to increase its provider participation

IV. Next Steps

- The second opportunity for stakeholder feedback is **due by 5 P.M. on Friday, April 24, 2015.** Please email stakeholder feedback to MDSDProvider@dhcs.ca.gov.
- DHCS will finalize both beneficiary utilization and provider participation measurements by May 2015.